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Bib Data Sheet

CONFIRMATION NO. 6881

<b>SERIAL NUMBER</b> 09/853,760	<b>FILING DATE</b> 05/14/2001 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> 2880/347
<b>APPLICANTS</b> Pertti Tormala, Tampere, FINLAND; Tero Valimaa, Tampere, FINLAND; Kimmo Lahteenkorva, Tampere, FINLAND;				
<b>** CONTINUING DATA *****</b> NONE MBP				
<b>** FOREIGN APPLICATIONS *****</b> NONE MBP				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 07/30/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <u>MBP</u> Initials	<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 23838				
<b>TITLE</b> Minimally traumatic surgical device for tissue treatment				
<b>FILING FEE RECEIVED</b> 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	